## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

SHEPSOLOUS

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                      |   |                 |                                  |                                       |                  |            | SMALL ENTITY TYPE |                        |       | OTHER THAN OR SMALL ENTITY |                        |
|---|----------------------|---|-----------------|----------------------------------|---------------------------------------|------------------|------------|-------------------|------------------------|-------|----------------------------|------------------------|
| TOTAL CLAIMS  |                      |   | 47              |                                  |                                       |                  |            | RATE              | FEE                    |       | RATE                       | FEE                    |
| FO  | R                    |   | NUMBER FILED    |                                  | NUMB                                  | ER EXTRA         |            | BASIC FEE         | 370.00                 | OR    | BASIC FEE                  | 740.00                 |
| то  | TAL CHARGEA          | BLE CLAIMS                                  | 4 7 minus 20=   |                                  | * 27                                  |                  |            | X\$ 9=            | 243                    | OR    | X\$18=                     |                        |
| IND   | EPENDENT CL          | AIMS  | S mi            | nus 3 =                          | * 2                                   |                  |            | X42=              | 34                     | OR    | X84=                       |                        |
| ΜU  | LTIPLE DEPEN         | DENT CLAIM PI                               | RESENT          |                                  |                                       |                  |            | +140=             |                        | OR    | +280=                      |                        |
| * If the difference in column 1 is less t   |                      |   |                 | than zero, enter "0" in column 2 |                                       |                  | L          | TOTAL             | 697                    | OR    | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |                      |   |                 |                                  |                                       |                  |            | SMALL I           | ENTITY                 | OR    | OTHER<br>SMALL             |                        |
|   | (Column 1)<br>CLAIMS |   | HIGH            |                                  |                                       | (Column 3)       | Г          |                   | ADDI-                  | )<br> |                            | ADDI-                  |
| AMENDMENT A   |                      | REMAINING<br>AFTER<br>AMENDMENT             |                 | PREVI                            | IBER<br>OUSLY<br>FOR                  | PRESENT<br>EXTRA |            | RATE              | TIONAL                 |       | RATE                       | TIONAL<br>FEE          |
|   | Total                | *   | Minus           | **                               |                                       | =                |            | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|   | Independent          | *   | Minus           | ***                              |                                       | =                |            | X42=              |                        | OR    | X84=                       |                        |
| Ľ   | FIRST PRESE          | NTATION OF M                                | ULTIPLE DEI     | PENDEN                           | T CLAIM                               |                  |            | +140=             |                        | OR    | +280=                      |                        |
|   |                      |   |                 |                                  |                                       |                  | L          | TOTAL             |                        | ΛP    | TOTAL                      |                        |
|   |                      | (Column 3)                                  | P               | ADDIT. FEE                       |                                       |                  | ADDIT. FEE | <u> </u>          |                        |       |                            |                        |
| AMENDMENT B   |                      | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                 | HIGI<br>NUM<br>PREVI             | mn 2)<br>HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total                | *   | Minus           | **                               |                                       | =                |            | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|   | Independent          | * .   | Minus           | ***                              |                                       | = .              |            | X42=              |                        | OR    | X84=                       |                        |
|   | FIRST PRESE          | ULTIPLE DEI                                 | PENDEN          | T CLAIM                          |                                       | 1 t              | +140=      |                   |                        | +280= |                            |                        |
|   |                      |   |                 |                                  | •                                     |                  | L          | TOTAL             |                        | OR    | TOTAL                      |                        |
|   |                      |   |                 |                                  |                                       |                  | P          | ADDIT. FEE        |                        | OR    | ADDIT. FEE                 |                        |
|   | 1 10000350           | (Column 1)<br>CLAIMS                        |                 |                                  | mn 2)<br>HEST                         | (Column 3)       |            |                   |                        |       |                            |                        |
| AMENDMENT C   |                      | REMAINING<br>AFTER<br>AMENDMENT             |                 | NUN<br>PREV                      | MBER<br>NOUSLY<br>FOR                 | PRESENT<br>EXTRA |            | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total                | *   | Minus           | **                               |                                       | =                |            | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|   | Independent          | *   | Minus           | ***                              |                                       | =                |            | X42=              |                        | OR    | X84=                       |                        |
| F   | FIRST PRESE          | ULTIPLE DE                                  | TIPLE DEPENDENT |                                  |                                       | <b>!</b>         | +140=      |                   | OR                     | +280= |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                      |   |                 |                                  |                                       |                  |            |                   |                        | OB    | TOTAL                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                      |   |                 |                                  |                                       |                  |            |                   |                        |       |                            |                        |